

PRINTED: 06/22/2015
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: FCL052005	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 05/28/2015
NAME OF PROVIDER OR SUPPLIER HERITAGE CREEK FAMILY CARE ESTATES		STREET ADDRESS, CITY, STATE, ZIP CODE 1474 SMALLTOWN ROAD PINK HILL, NC 28572		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments This report is of a biennial construction survey done by Bob Getchell on May 28, 2015. This facility was first licensed as an Family Care Home for six (6) ambulatory Residents (able to evacuate and respond without any physical or verbal assistance during a fire or other emergency) on June 08, 2006. Based on this we are requiring the home to be in compliance with the 2005 Rules 10A NCAC 13G for the Licensing of Family Care Homes, and, the 2002 North Carolina State Building Code - Section 421.2 - Residential Care Homes. Deficiencies were noted which will require a new plan of correction	C 000	CONSTRUCTION SECTION JUL 06 2015 RECEIVED	
C 174	Building Equipment Maintained Safe, Operating SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition. (j) This Rule shall apply to new and existing family care homes. This Rule is not met as evidenced by: 1. Based on observation, the facility was not maintained in a safe manner by having doors that did not close completely and latch in order to contain smoke and fire. This could affect all residents by not containing smoke or fire in the fire compartment or room of origin. Findings include: The following doors have issues: a) Back left	C 174	① The back left bedroom door will now latch, the back exit door doesn't scrub, the front door knob has been tightened + the closet door now has a knob. The administrator will make monthly rounds to ensure all doors + latching mechanisms operate properly to prevent any further issues. The findings will be brought to QA for review + analysis	07/3/2015

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

4850

NXQP21

If continuation sheet 1 of 2

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C 174	Continued From page 1 bedroom door won't close and latch, b) Back Exit door scrubs frame, c) Front door knob is loose, d) Right middle bedroom closet door has no door knob.	C 174		
	2. Based on observation, the building plumbing fixtures were not maintained in a safe manner because a toilet is coming loose from the floor. This would affect all residents using the hall toilet by exposing them to leaks from a broken wax seal. Findings include: The bathroom at the Living Room has the following issues: a) A toilet coming loose from the floor. b) The towel bar is missing	(2)	The toilet has been tightened to the floor & flange replaced. The towel bar has been replaced. The administrator will make monthly rounds to ensure compliance. The findings will be brought to QA for review monthly & develop an additional plan as necessary.	07/01/2015